

PROJECT PARTICIPATION INPUT FORM

The Commonwealth of Massachusetts

Office of the Comptroller

Revised As Of: 12/16/92

| |
|-------------------------------|
| Department/ Organization Name |
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|--------------------|------|-------------------|--------------|
| Trans PZ | Dept | Document R/Org | ID Number |
|--------------------|------|-------------------|--------------|

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|---------|------|---------|-------------|-------|
| PZ Date | Dept | Project | Sub Project | Phase |
|---------|------|---------|-------------|-------|

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| Document Total | Eligible Amount | Sponsor |
|----------------|-----------------|---------|

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|---------------|-----|
| Ineligible | (B) |
| Federal Share | (F) |
| State Share | (S) |
| 3rd Party | (T) |

| LN | Action (E) (M) | Fund Type | Funding Participant | Fed Fund Acct. | Agreement Amount | Billing Priority | Agreement Date | Billing Cycle |
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| Prepared By: _____ | Title: _____ | Date: _____ | |
| Approved By: _____ | Title: _____ | Date: _____ | Phone #: _____ |
| Entered By: _____ | Title: _____ | Date: _____ | PAGE _____ OF _____ |